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ABSTRACT

Recent research on informal support in senior housing has suggested that frail tenants receive limited assistance from their neighbors. Far less attention has been directed at understanding the role of healthy, independent tenants as neighborly helpers. Informal neighborly assistance among tenants in a congregate housing facility was examined to identify the types of helping behavior which occurred among tenants. In-depth, open-ended interviews with 24 tenants revealed four patterns of assistance: (1) high helpers; (2) activity helpers; (3) reciprocal helpers; and (4) non-helpers. High helpers saw themselves as helping many tenants in the complex. Activity helpers helped their neighbors by performing various activities. All activity helpers reported that their assistance was sporadic. Reciprocal helpers limited their involvement to one or two special friends. Non-helpers were respondents who had recently moved into the complex, who reported health problems which interfered with their helping, and who reported that they had never been asked to help or that their efforts to help had been rebuffed. Housing managers should be aware of the important role that activities may play in providing opportunities for helping. (NB)

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The Etiquette of Helping in Congregate Housing[1]

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Abstract

Informal neighborly assistance among tenants in a congregate housing facility was examined to identify the types of helping behavior which occurred among tenants. In-depth, open-ended interviews with 24 tenants revealed 4 patterns of assistance: High helpers, Activity helpers, Reciprocal helpers, and Non-helpers. The implications of these different helping types for working with the residents in congregate housing are discussed.

Key words: Congregate Housing Neighborly Assistance Social Support

Recent research on informal support in senior housing has suggested that frail tenants receive limited assistance from their neighbors (Sheehan, 1986; Stephens & Bernstein, 1984). Possible explanations proposed to account for these findings include: 1) the inability of frail tenants to keep up with the more active, independent tenants (Sheehan, 1986; Stephens & Bernstein, 1984); 2) the avoidance of dependent relationships with healthier, more independent tenants; 3) a desire to avoid gossipy neighbors; and 3) the loss of irreplaceable mutually supportive neighbors through death or relocation (Sheehan, 1986).

Far less attention has been directed at understanding the role of healthy, independent tenants as neighborly helpers. Two recent studies (Goodman, 1984; Sheehan, 1986), however, provide information concerning the involvement of independent tenants in either neighborly mutual support or helping behavior with frail tenants. Goodman (1984) in describing patterns of assistance noted three types of helpers: high helpers; mutual helpers; and isolates. Sheehan (1986) has noted that the healthier, independent tenants in senior housing perceived constraints that limited their ability to help their frail neighbors. Among these constraints were the desire to conserve their declining physical stamina/resources ("We're all aging"), limiting help to only tenants with whom they shared a mutually supportive relationship ("One hand washes the other"), and a reluctance to provide

help that would interfere with that provided by formal support agencies (Sheehan, 1986).

Two studies have noted the presence of tenants who provide high levels of assistance to their neighbors. These tenants carry a caseload of their less fortunate neighbors. They have been labelled either "high helpers" (Goodman, 1984) or "multiple helpers" (Sherwood, Morris & Sherwood, 1984). According to Goodman (1984), high helpers typically receive little, if any, assistance from others in the complex.

Few studies have examined informal help among elderly neighbors in congregate housing. Among the questions that need to be addressed are: What types of neighborly support characterize the helping behavior of congregate housing tenants? How does the provision of formal on-site services affect the willingness of tenants to provide help or assistance to their frail neighbors? Do perceived barriers exist which limit tenants' helping behavior? Is there an etiquette of helping which characterizes informal support among congregate housing tenants?

The present study employed a qualitative approach to examine helping expectations and behavior among tenants in congregate housing. The research instrument was an in-depth, open-ended interview covering topics concerning prior expectations about congregate housing, types of neighborly

assistance, and special friendships among tenants. Interviews were conducted with 24 tenants residing in a congregate facility. Tenants ranged in age from 51- to 89-years of age. Two-thirds of the tenants (n = 16) were in their 70s and 80s. Specific age breakdown of tenants indicated: one tenant in her 50s; 7 in their 60s; 8 in their 70s; and 8 in their 80s. The majority of tenants suffered major chronic health problems which limited their activites. Twenty-two of the 24 tenants were females. One quarter of the tenants (n=6) reported that they had no children. Length of residence in the complex ranged from 3 weeks to 3 years. Six tenants were among the original in-movers to the complex when it opened 3 years ago.

The congregate housing facility, Cromwell Court, is a 42-unit, state sponsored, local housing authority, complex designed for elderly and handicapped individuals, in a suburban area of a Northeastern state. Each unit is a separate apartment consisting of a living room, bedroom, kitchen area, and bathroom. All units are on a single level. Apartments open onto one of 2 corridors which lead to a central reception area. Access to each unit is through this central area. Opportunities for unobtrusive monitoring of tenants (e.g., checking shades in the morning) are lacking. The dining room is located at the south end of the building. Access to the dining hall is through one central corridor.

On-site services are a noon meal, 7 days a week, and 24-hour emergency coverage. Health services are not provided on-site. Community volunteers provide occasional help with heavy housekeeping chores (e.g., washing windows, etc.). Social programming includes arts and crafts activities and occasional movies, performances by local groups, special evening meals, and trips or outings. Since its inception, Cromwell Court has experienced a turnover rate of approximately 50%.

Two females conducted the interviews, all interviews were transcribed. Interviews lasted from 30 minutes to 2 hours.

Results

Analysis of the tenant interviews indicated four patterns of neighborly helping behavior. Differences among the helping types reflected differences in how helping was defined and the frequency of helping behavior. The helping types were not distinguished by specific helping behaviors, but rather by tenants' orientation to helping neighbors. Tenants within each type shared certain characteristics in their approach to helping which distinguished them from the other types. Motivations for helping or not helping varied across the types.

Types of Helpers.-- The four types of helpers that emerged from the interviews were: High helpers (n=3); Activity help-

ers (n = 10); Reciprocal helpers (n = 3); and Non-helpers (n =8). High helpers were tenants who saw themselves as helping many tenants in the complex. The 3 High helpers were all women and original in-movers into the complex. Mrs. C, an 82-year-old Polish-speaking widow is the most obvious example. She described her attitude toward helping, "I'm helping everyone. I'm doing little things, I'm trying everything.. I'm helping for everybody...I'm seeing somebody who can't do it, I'm help...Somebody sick I'm going for visit..." According to Mrs. C, her involvement with others keeps her from thinking about her own problems. She enjoys her independence and hates "doing nothing."

The 2 other High helpers assist their neighbors by organizing activities. Both are younger than most of the other tenants. Mrs. P, a retired nurse, is 64-years of age. Although she has suffered four strokes, her outlook on life is extremely positive. According to Mrs P., "We (she and Mrs. T) seem to get things going...Others could do it but I think they're so afraid of stepping on somebody's toes or something, so they sit back." According to Mrs. P, "everybody watches out for everybody else... like the buddy system"; new tenants who move into the complex "become part of the family."

The third High helper, Mrs. T, age 51, in addition to organizing activities with Mrs. P, provides direct assistance

to several frail neighbors (cooking, visiting, and hairdressing). Although Mrs. T is one of the younger tenants, her health is extremely poor. Her extensive helping within the complex has caused her own health to suffer. She reported that she is seeing a psychologist because she helps too much. With this counselor's help, Mrs. T. has reduced the amount of assistance that she provides to her neighbors. She has been advised that instead of providing direct help to neighbors she should call the desk when someone needs assistance. Reducing the help she provides has not been easy. She expressed her conflict about helping in the following statement, "I don't feel guilty... since I've been going to the psychologist...But I always think...it means so much to her that I would do it even if I was dying, but I don't do that anymore." Included among the High helpers, she may be more accurately described as a "recovering Overhelper".

As noted previously, all High helpers were women and original in-movers into Cromwell Court. They are also "successful helpers." Unlike several tenants who reported that their efforts to help had been rejected by their neighbors, none of these women reported that their helping had been rejected. The reasons High helpers gave for their helping were: (1) to keep busy to avoid thinking about problems; (2) as an expression of concern and fellowship for other tenants; and (3) to provide needed assistance which others were either unable or reluctant to provide. Two High help-

ers expressed their hopes that others might take care of them when they need assistance. In Mrs. C's words, "I think maybe somebody help me after I'm want help."

High helpers did not mention that helping served as an important source of self-esteem. However, a newly arrived tenant, Mrs. N, age 80, expressed her dilemna in wanting to feel needed and yet not wanting to push herself on anyone. For Mrs. N, the etiquette of helping is complex. In her own words, "I'll do anything they ask me to, you know I would like to be needed. Because you really feel desperate when you're not needed." Elaborating on the etiquette of helping, Mrs. N noted "I don't know them very well...I don't want to push myself on anyone. I'll let things happen, I'll play it by ear." Aware of the social boundaries of helping, Mrs. N observed, some tenants are "too helpful... really guiding me around which I don't really appreciate. I want to learn where things are myself."

The social boundaries of helping were also described by one of the High helpers, Mrs. T. She noted as original in-movers "We all came in at the same time, so we were all in the same place... you didn't know should you...you didn't want to be over friendly, and you didn't want to be a stick in the mud. So we all felt our way about the same time." Original in-movers into a complex may be in a socially advantaged position since (1) their uncertain feelings con-

cerning social etiquette are shared by others and (2) they take part in shaping the social norms.

One factor differentiating High helpers from other helper types is their willingness to act. Unlike other tenants, they do not wait for other tenants to ask them for help. High helpers were also high in sociability. All reported that they have many special friends among the other tenants. In fact, they share many of the same friends. All expressed a life long orientation to helping others.

High helpers, however, differed with respect to health and age. Mrs. C is 82 and in good health, Mrs. P is 64 and in fair health, while Mrs. T is 51 and in poor health.

The second pattern of helping is the Activity helper (n = 10). These tenants help their neighbors by performing various activities. They differ with respect to (1) the extent of their involvement (ranging from participation in several activities to minimal involvement); (2) the centrality or importance ascribed to helping; and (3) the expressed sense of enjoyment associated with helping. All, however, defined their activity participation as "helpful" to their neighbors. In addition, all indicated that their helping was sporadic. Activities identified included preparing special meals, setting and clearing the table, talking with other tenants, participation in craft activities, occasional errands, and sending cards for special occasions.

Two subtypes of Activity helpers were identified. The first group consisted of tenants who expressed great enjoyment concerning helping when and where they could (n =6). These tenants ascribed importance to helping their neighbors and expressed a desire to make life more pleasant for others. The second group viewed helping to be of secondary importance to other interests and concerns (n =4). For this group, their satisfaction with congregate housing was based upon the freedom it provided from responsibilities and worries.

The following tenants are examples of the first type of Activity helper. Mrs. A, age 89, a resident for the past year, indicated that she enjoys helping with special meal preparations at the complex. Another tenant, Mrs. K, age 73, a new resident, provides occasional help in clearing the table. She expressed her satisfaction in being asked to help, "I've been asked to give a hand there, so that makes me feel helpful and glad, too...happy." She added that she is ready to help if asked, "If they need my help and they ask I will do my best."

Mrs. B, age 68, a former resident in a convalescent home, is also an example of the first type of Activity helper. She enjoys helping with kitchen and craft activities. She stated, "Well, we work together in the craft room, or we work over there in the dining room... I like that." She

described the nature of her activities in the following manner, "Sometimes we do a little bit more, a little bit here, a little bit there." Mrs. B noted that she prefers to help in this way because she is "bashful" and does not "know too much."

Other tenants who expressed satisfaction with helping their neighbors were tenants who either helped by talking with others or sent cards for special occasions. Mrs. F, age 65, who is recovering from a heart attack, noted that she helps others by talking to them. According to Mrs. F, it helps to talk to others who have experienced similar problems. Talking to someone who has just come back from the hospital may make it easier for them.

Two tenants indicated they helped other tenants by sending cards for special occasions. According to Miss B, age 81, "We're great for sending each other birthday cards...it makes life pleasant...And we do little things for each other. If anybody has a little extra fruit or something, they bring it down to the dining room." Mr. B, age 75, sends cards to his neighbors and occasionally drives tenants when they need a ride. Despite his severe emphysema, which limits his ability to get around, he enjoys helping his neighbors when he can. He noted that, when he provides transportation to his neighbors, they offer him money for his assistance. He rejects offers of financial repayment for

his services, suggesting that the tenants he helps can reciprocate by doing something for him.

The second type of Activity helper includes tenants whose helping is very sporadic and for whom helping is of secondary importance (n = 4). Included among these tenants are those who did not clearly identify how they helped others. Mrs. D, age 70 and mother of 10 children, moved to Cromwell Court less than 1 year ago for rest and relaxation ("no kids, no worries in the world"). While she reported that she does not help any tenants on a regular basis, she indicated that if she sees someone who needs help carrying something she helps them out, particularly, "the real older ones". Her health problems, however, keep her from giving extensive amounts of help to her neighbors. According to Mrs. D, her emphyzema limits her, "...so I can't do too much hurrying myself." She has no special friends in the complex because she does not want to get "too attached" to anyone. Mr. J, one of the most active tenants in Cromwell Court is also an Activity helper. He reported that he runs occasional errands for a male neighbor when he needs something at the store. According to Mr. J, "...outside of asking him if he wants some juice or milk, or little things like this when I'm going out, that's about all I can do." Having suffered a stroke approximately 5 years ago, Mr. J has developed a busy schedule of daily physical fitness activities (swimming, golfing, health club activities) to keep himself in

shape. He enjoys Cromwell Court, in his own words, because "I don't have to worry about nothing..I can basically take care of my own health, do what I want to do...Now basically, all I do is for me...All I have to do is eat, rest, and do my own thing."

Several older tenants, who mentioned that they help when they can, did not provide any specific information concerning the kinds of help they provide. Both Mrs. M and Mrs. F, 83 and 84-years of age, respectively, indicated that they helped but did not specify how they helped. According to Mrs. M, "I help when I can." While Mrs. F noted that she helps "sometimes when I feel like it", she also noted that she likes to be alone and doesn't like too much company.

The majority of Activity helpers suffer major restrictions in health or functional ability. For these tenants, the sporadic nature of their helping allows them to help when they feel up to it. All Activity helpers, however, are not functionally impaired.

For either type of Activity helper, the nature of their helping allows them to help when either their health allows or when other activities do not interfere. For several Activity helpers, kitchen and craft activities are the major ways in which they help. Involving male tenants in either kitchen or craft activities may be difficult, since they may not define these activities as appropriate. Mrs. P, a High

helper, mentioned her attempts to help Mr. B define a meaningful helping role. She suggested that Mr. B could help with special evening meals by collecting money. Ways of involving tenants in defining meaningful roles or activities need to be further explored.

The third type of helper is the Reciprocal helper (n = 3). These tenants limit their involvement to one or two special friends. Mrs. Q, age 65, is a Reciprocal helper. Describing her relationship with her special friend, Mrs. Q noted that "Any time she needs me ...I was helping her out...I'm always running to help her out, and she in return takes me shopping and does things for me. And I do things for her, we all try to do that." Mrs. Q, one of the healthiest tenants, has just recently retired.

Mrs. Y, age 82, and Mrs. H, age 72, share a reciprocal relationship. They do not help any of the frail tenants because they feel it is depressing to be with sick older people. Mrs. H is particularly unhappy because she did not expect the other tenants to be so sick.

The fourth type of helper is the Non-helper (n = 8). Among the Non-helpers are tenants who have recently moved into the complex, those who report physical or health problems which interfere with their helping, and those who report that they have never been asked to help or their efforts to help have been rebuffed.

Several tenants indicated that their health kept them from helping other tenants. Mrs. G, age 63, who has lived in Cromwell Court 7 months is recovering from a stroke which affected the use of her arm and leg and her speech. According to Mrs. G, "No I don't do anything like that...cause I can't... see I only have one hand." Mrs. W, age 79, a resident for 4 months is also a Non-helper. According to Mrs. W, she does not help others because she is "cripple" Another recent in-mover, Mrs. H, age 74, who moved into Cromwell Court 2 months ago reported that she is in constant pain due to her osteoporosis. In Mrs. H's words, "If I didn't have all this pain, I would be up and doing more." Presently, however, she does not help her neighbors and does not ask help from them.

Other Non-helpers indicate that they have never been asked to help. Mrs. A, age 80, has lived in Cromwell Court only one month. She indicated her readiness to help, if asked. However, her community activities and meetings with friends keep her away from the complex most of the time. Currently, she maintains active leadership roles in several community organizations (e.g., Commission on Aging, Meals-on-wheels, AARP). According to Mrs. A, all her neighbors take care of themselves and do not have any unmet needs. In her own words, "they have everything there they want." She indicated that she is ready to drive any of her neighbors, however, "no one has asked for help."

Another new tenant, Mrs. N, age 80, who was previously discussed, expressed her dilemna about wanting to be needed but not wanting to push herself on others. She hopes to get to know the other tenants so she will feel more comfortable in helping out. She had expected the tenants to welcome her as a new tenant, "but so far maybe they're a little suspicious." Although she leaves her door open and invites her neighbors to come and see her, none of her neighbors have come yet. Mrs. N, therefore, although expressing a desire to help is categorized as a Non-helper.

Unsuccessful or unaccepted offers of assistance may deter future offers of help. Mrs. S, age 79, a 4 month resident is also a Non-helper. Her health and previous unsuccessful efforts to help account for her not helping other tenants. According to Mrs. S, she does not help others, "I just stay with friends and we go out." She had previously attempted to help another tenant..."but she (other tenant) doesn't want that she's very independent. So when I see her I leave her alone". She no longer helps other tenants because in her own words, "that would kind of upset them, right." Since Mrs. L does not define her relationship with her friends as a mutual helping relationship, she is categorized as a Non-helper.

Discussion

Since the present study did not employ an a priori definition of either help or helping behavior, tenants were allowed to provide their own definitions. As a result, 4 patterns of helping emerged: High helpers, Activity helpers, Reciprocal helpers, and Non-helpers. Variations in helping types appeared to fit differences in life style, health, personal preferences, and personality. A wide range of behaviors were identified as helping neighbors. Behaviors included: organizing activities, direct assistance with personal care (e.g., cooking, cleaning, etc), running errands, sending cards, talking with other tenants, participation in activities (such as crafts), preparation of special meals, and other kitchen activities.

Tenants varied with respect to types of helping activities, the person(s) helped, and the nature of the helping activity (e.g., sporadic or continuous). Each of the helping types identified shared certain characteristics. High helpers provided a variety of types of assistance to many tenants. Activities performed were organizing activities, direct assistance to needy neighbors, and daily assistance with table setting, etc. Other tenants recognized and accepted the helping activities of the women. Since all High helpers were among the original in-movers to the complex, it is interesting to speculate whether their resident status enabled them to assume the role of High helper. Whether or not resident status was a key factor in assuming the role of High helper, these women are clearly successful helpers.

Neither health nor age differentiated High helpers from the other helping types. The major factors which differentiated the High helpers from others were not being afraid to step in to offer help and a life-long orientation of doing things for others. Unlike other tenants who indicated that they had moved to congregate housing to take it easy, these women expressed the belief that through their actions they could help other tenants.

Activity helpers defined helping as participation in specific activities. They differed from one another with respect to the level of their engagement and the types of activities. Some Activity helpers engaged in a wide range of activities, while others mentioned only one activity which they defined as helping. All Activity helpers, however, noted that their participation was sporadic allowing helping to be compatible with either their health or lifestyle.

Reciprocal helpers limited their involvement to one or two tenants with whom they shared a mutually supportive relationship. The Non-helpers expressed a variety of reasons for not helping other tenants. Health, previous rejected offers of help, not perceiving any unmet needs among tenants, and "newness" to the complex were among the reasons given for not helping neighbors. Whether the recent in-movers who expressed a desire to help become helpers remains to be seen as they settle into the complex and its social milieu.

It is interesting to contrast the present findings to previous research examining informal support in senior housing. Results of the present study extended the previously noted types of helping patterns identified by Goodman (1984) to include a fourth type, the Activity helper. Results of the present study did not support previous findings that High helpers would not accept help from their neighbors. Two of the 3 High helpers in the present study expressed the hope that when they would need help there would be others to help them.

The present study found little evidence to support the findings concerning traditional senior housing, namely, that tenants provide support to their neighbors by watching out for one another (e.g., checking shades in the morning) (Hochschild, 1973; Sheehan, 1986). Only one tenant in the present study, a High helper, referred to the "buddy system" of watching out for the well-being of others. Several possible explanations may account for this finding. First, the presence of 24-hour on-site staff may remove this concern from congregate housing tenants. Second, the health and functional characteristics of the tenant population in congregate housing may explain tenants' greater restriction of social space and restricted social perceptions of watching out for others (Lawton, 1985). A third explanation may be the design of the congregate complex whereby unobstrusive monitoring of window shades is not possible.

Increased understanding of the social environment in congregate housing is vital for housing managers and for social service and health providers working with congregate housing tenants. Rather than imposing an a priori definition of helping behavior, such as direct personal assistance to frail tenants, such as help with errands or cooking, housing managers should be sensitive to the way tenants define helping. A narrow definition of "helping" may fail to recognize the manner in which tenants view their behavior as helping their neighbors.

Housing managers should also be aware of the important role that activities may play in providing opportunities for helping. Housing managers should be particularly sensitive to assuring that activities are provided that contribute to the tenants' personal well-being and improve the social climate in the complex. Creating meaningful roles for tenants may encourage their proactive adaptation to changes in their health and their environment (Lawton, 1985). Activities should also be developed which address the interests of both male and female tenants. Primary reliance on activities, such as cooking and crafts, as vehicles for promoting "activity helping" may be unappealing to most male tenants. New tenants who express a desire to help or feel needed, should be encouraged to participate in activities that will promote their feelings of self-worth, facilitate their proactive adapatation to a new environment, and contribute to a warm social climate in the congregate facility.

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